

**PATENT**

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Dick et al.

**Application No.:** 09/826,547

**Confirmation No.:** 3765

**Filed:** 04/05/2001

**For:** BASE STATION SYNCHRONIZATION  
FOR WIRELESS COMMUNICATION SYSTEM

**Group:** 2631

**Examiner:** Not Yet Known

Our File: I-2-164.1US

Date: 07/19/2001

**COMMUNICATION IN RESPONSE TO NOTICE TO  
FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

Box Missing Parts  
Commissioner for Patents  
Washington, D.C. 20231

Sir:

In response to the Notice to File Missing Parts of Nonprovisional Application mailed from the Office on 06/01/2001, the following are enclosed:

1. Copy of Notice to File Missing Parts of Nonprovisional Application;
2. Declaration for Utility or Design Patent Application; and
3. A check in the amount of \$130.00 as payment of the surcharge for a large entity.

07/25/2001 SMINASS1 00000113 09826547

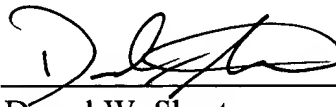
01 FC:105 130.00 CH

**Applicant:** Dick et al.  
**Application No.:** 09/826,547

If there are any questions regarding the enclosed information, it is respectfully requested that the undersigned be contacted.

Respectfully submitted,

Dick et al.

By   
Darryl W. Shorter  
Registration No. 47,942  
(215) 568-6400

Volpe and Koenig, P.C.  
Suite 400, One Penn Center  
1617 John F. Kennedy Boulevard  
Philadelphia, PA 19103

DWS/lhc  
Enclosures



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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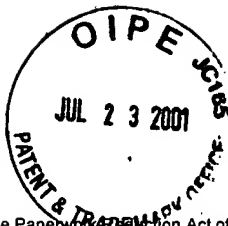
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/826,547	
	<b>Filing Date</b>	04/05/2001	
	<b>First Named Inventor</b>	Dick et al.	
	<b>Group Art Unit</b>	2631	
	<b>Examiner Name</b>	Not Yet Known	
<b>Total Number of Pages in This Submission</b>	9	<b>Attorney Docket Number</b>	I-2-164.1US

<b>ENCLOSURES (check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
<b>Firm or Individual name</b>	Darryl W. Shorter Volpe and Koenig, P.C.	Reg. No. 47,942
<b>Signature</b>		
<b>Date</b>	07/19/2001	

<b>CERTIFICATE OF MAILING</b>		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on this date: <span style="border: 1px solid black; padding: 2px;">07/19/2001</span>		
<b>Typed or printed name</b>	Darryl W. Shorter	
<b>Signature</b>		<b>Date</b> 07/19/2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Volpe and Koenig, P.C. Revision of

PTO/SB/17 (11-00)

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 130.00

**Complete if Known**

Application Number	09/826,547
Filing Date	04/05/2001
First Named Inventor	Dick et al.
Examiner Name	Not Yet Known
Group Art Unit	2631
Attorney Docket No.	I-2-164.1US

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	09-0435
Deposit Account Name	InterDigital Comm. Corp.

- ☒
- Charge Any Deficiency or Credit any Overpayment in the Total Fees Associated with this Communication

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$0.00

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	- **	X	
Multiple Dependent	- **	X	

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$0.00

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	130
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 390	216 195	Extension for reply within second month	
117 890	217 445	Extension for reply within third month	
118 1,390	218 695	Extension for reply within fourth month	
128 1,890	228 945	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,240	241 620	Petition to revive - unintentional	
142 1,240	242 620	Utility issue fee (or reissue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(q)	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	
179 710	279 355	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 130.00

**SUBMITTED BY**

Name (Print/Type)	Darryl W. Shorter	Registration No. (Attorney/Agent)	47,942	Complete (if applicable)	Telephone	215-568-6400
Signature		Date	07/19/2001			

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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